PTO/SB/05 (03-01) Approved for use through 10/31/2002 OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

Express Mail Label No.

UTILITY PATENT APPLICATION **TRANSMITTAL**

	Attorr	ney Docket No		
	First I	nventor	Behrouz Amir	ıi
***************************************	Title	A high p	ocear high xield to	

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICA	TION ELEMENTS		ssistant Cor	mmissioner for Patents
See MPEP chapter 600 cond		Vashington,	DC 20231	
	om (e.g., PTO/SB/17)	7. CD-ROM or CD-F		
Applicant claims s	duplicate for fee processing) small entity status	Computer Progra		
2. See 37 CFR 1.27.		8. Nucleotide and/or Amino (if applicable, all necess		ence Submission
3. Specification (preferred arrangement	[Total Pages 13] t set forth below)	a. Computer Read	- /	
- Descriptive title		 b. Specification Sequen 	ce Listing or	n: C
	e to Related Applications arding Fed sponsored R & D	i. CD-RON	for CD-R (2	2 copies); or
_	equence listing, a table,	ii. paper	`	
or a computer p - Background of	program listing appendix		fvina identit	y of above copies
- Brief Summary	of the Invention			· · · · · · · · · · · · · · · · · · ·
- Brief Descriptio - Detailed Descri	n of the Drawings (if filed)	ACCOMPANYING		
- Claim(s)	paon	· · · ·	•	sheet & document(s))
- Abstract of the	Disclosure	10. 37 CFR 3.73(b) (when there is a		Power of Attorney
4. V Drawing(s) (35 U	(.S.C. 113) Total Sheets 2	ł " 	- ,	ent (if applicable)
5. Oath or Declaration	[Total Pages]	12. Information Disc Statement (IDS)		Copies of IDS Citations
a. Newly execu	uted (original or copy)	13. Preliminary Ame		
Copy from a	prior application (37 CFR 1.63 (d)) tion/divisional with Box 18 completed)	14. Return Receipt (Should be speci	Postcard (M	
i. DELET	ION OF INVENTOR(S)	15. Certified Copy of (iff foreign priorit	of Priority Do	ocument(s)
	tement attached deleting inventor(s) the prior application, see 37 CFR	Nonnublication i		der 35 U.S.C. 122
	and 1 33(b)		licant must a	attach form PTO/SB/35
6. Application Data	Sheet. See 37 CFR 1.76	17. Other:	, 	
18. If a CONTINUING APPLI	CATION, check appropriate box, and supply	the requisite information belo	w and in a p	oreliminary amendment,
or in an Application Data She	eet under 37 CFR 1.76:	•	·	
Continuation	Divisional Continuation-in-part (CIP)	of prior application No	/	
Prior application information				
For CONTINUATION OR DIVISI	ONAL APPS only: The entire disclosure of the f the disclosure of the accompanying continual	prior application, from which an	oath or decl	aration is supplied under
The incorporation can only be	relied upon when a portion has been inadverte	ntly omitted from the submitted	application p	parts.
	19. CORRESPONDEN	ICE ADDRESS		
Customer Number or Bar Co	ode Label (Insert Customer No. or Atlach ber o	ode label here)	Correspon	dence address below
Name	Dr. Behrouz An	าเที		
	Micro-Fission Track	ino logu		
Address	P.O. BOX 32033			
City	F , # 61 L	State TN	Zip C	Code 37930
Country	USA Telep	10.55		
Country	USH Felep	110119 - 1000 1001 3	U VA Fa	× 1001.001
Name (Print/Type)	BEHROUZ AMINI	Registration No. (Attorn	ey/Agent)	
Signature	Behrecz Chmini		Date	Nev = 23,01

Burden Hour Statement This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO. Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

Under the Paperwork Reduction Act of 1995, no persons are required to res

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)	3	70	.00
------	---	----	-----

Co	emplete if Known
Application Number	
Filing Date	_
First Named Inventor	Behrous Amini
Examiner Name	
Group Art Unit	
Attorney Docket No.	

METHOD OF PAYMENT	FEE CALCULATION (continued)			
1. The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES			
indicated fees and credit any overpayments to: Deposit	Large Small			
Account Number	Fee Fee Fee Fee Foo Description			
. Deposit	Code (\$) Code (\$)	Fee Paid		
Account Name	105 130 205 65 Surcharge - late filing fee or oath			
Charge Any Additional Fee Required Under 37 CFR 1 16 and 1 17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet			
Applicant claims small entity status See 37 CFR 1 27	139 130 139 130 Non-English specification			
2. Payment Enclosed:	147 2,520 147 2,520 For filing a request for ex parte reexamination			
Check Credit card Money Other	112 920* 112 920* Requesting publication of SIR prior to Examiner action.			
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action			
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month			
Large Entity Small Entity	116 400 216 200 Extension for reply within second month			
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 920 217 460 Extension for reply within third month			
101 740 204 270 (15)4.5%	118 1,440 218 720 Extension for reply within fourth month			
106 330 206 165 Design filing fee	128 1,960 228 980 Extension for reply within fifth month			
107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal			
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal			
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing			
CURTOTAL (4) (6)	138 1,510 138 1,510 Petition to institute a public use proceeding			
SUBTOTAL (1) (\$)	140 110 240 55 Petition to revive - unavoidable			
2. EXTRA CLAIM FEES Fee from	141 1,280 241 640 Petition to revive - unintentional	-		
Extra Claims below Fee Paid	142 1,280 242 640 Utility issue fee (or reissue)			
Total Claims 15 -20** = O X =	143 460 243 230 - Design issue fee			
	144 620 244 310 Plant issue fee			
Multiple Dependent	122 130 122 130 Petitions to the Commissioner			
Large Entity Small Entity	123 50 123 50 Processing fee under 37 CFR 1 17(q)			
Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Strnt			
Code (\$) Code (\$) 103 18 203 9 Clarms in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)			
102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection.			
104 280 204 140 Multiple dependent claim, if not paid	(37 ČFR § 1 129(a)) 149 740 249 370 For each additional invention to be			
109 84 209 42. ** Reissue independent claims over original patent	149 740 249 370 For each additional invention to be examined (37-CFR § 1 129(b))			
110 18 210 9 ** Reissue claims in excess of 20	179 740 279 370 Request for Continued Examination (RCE)			
and over original patent	169 900 169 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$)	Other fee (specify)			
**or number previously paid, if greater, For Reissues, see above	*Reduced by Basic Filing Fee Pard SUBTOTAL (3) (\$)			

SUBMITTED BY		Complete (#applicable)
Name (Print/Type)	BEHROUZ AMINI Registration No (Attorney/Agent)	Telephone
Signature	Behrous exmini	Date Nov. 23,01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement. This form is estimated to take 0.2 hours to complete Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

FOR PICKUP CALL 1-800-222-1811





0000

www.usl

| PRIORITY MAIL UNITED STATES POSTAL SERVICE®

HOW TO USE:



1. COMPLETE ADDRESS LABEL AREA address and addressee information in customer block (white area) Type or print required return or on label (if provided).

Knoxville TN 37923 P.O. Box 32033 Behnooz Amini

+ Assistant Commissioner Sor Patent NA Patent Application
Of 20231



over cus (white a Remove

3. ATTACF

7707 2000 0000 04FL LOO7

EP-14G JANUARY 2001 USPS ALL RIGHTS RESERVED